DOCUMENT RESUME

ED 475 641 PS 031 238

AUTHOR	Malm, Karin; Geen, Rob
TITLE	When Child Welfare Agencies Rely on Voluntary Kinship Placements: New Federalism Issues and Options for States. An Urban Institute Program to Assess Changing Social Policies.
INSTITUTION	Urban Inst., Washington, DC.
SPONS AGENCY	David and Lucile Packard Foundation, Los Altos, CA.; Annie E. Casey Foundation, Baltimore, MD.; Robert Wood Johnson Foundation, Princeton, NJ.; Kellogg Foundation, Battle Creek, MI.; John D. and Catherine T. MacArthur Foundation, Chicago, IL.; Ford Foundation, New York, NY.
REPORT NO	Ser-310772-A-61
PUB DATE	2003-04-00
NOTE	8p.
AVAILABLE FROM	Urban Institute, 2100 M Street, NW, Washington, DC 20037. Tel: 202-833-7200; Fax: 202-293-1918; e-mail: pubs@ui.urban.org; Web site: http://www.urban.org. For full text: http://www.urban.org/ UploadedPDF/310772_A61.pdf.
PUB TYPE	Reports - Research (143)
EDRS PRICE	EDRS Price MF01/PC01 Plus Postage.
DESCRIPTORS	*Agency Role; Caregiver Child Relationship; Case Studies; *Child Welfare; *Children; *Foster Care; *Foster Children; Social Workers; State Agencies
IDENTIFIERS	*Kinship Foster Care

ABSTRACT

Summarizing findings from a forthcoming book, this policy brief examines when and how child welfare agencies rely on kin to care for children who are taken into state custody. The discussion is based on intensive case studies of local kinship care policies and practices; the case studies were conducted in 13 counties in Alabama, California, Connecticut, and Indiana. Findings revealed that the use of voluntary kinship care varied among counties, among offices within a county, and among individual workers. Agencies provided various types and levels of support to private kin caregivers seeking assistance from the child welfare agency. In California, Connecticut, and Indiana, as in most states, child welfare agencies used voluntary kinship care on a fairly limited basis, with few clear policies, procedures, or guidance on when and how workers should rely on voluntary kinship care. The result of this lack of policy was that kinship care could be used, intentionally or not, to influence birth parents and kin, especially in situations where there was substantiated child abuse/neglect. Alabama, like a handful of other states, used voluntary kinship care whenever possible. The brief highlights several issues regarding the child welfare agencies' role and responsibility when abused or neglected children are placed with kin, particularly that child welfare agencies must determine whether to treat kinship care as an extension of the biological family, or as a type of temporary substitute care. The brief asserts that additional research is needed that assesses the risk of different kinship care arrangements and helps guide child welfare agencies and staff in making decisions regarding their role and responsibility. (KB)

Reproductions supplied by EDRS are the best that can be made
from the original document.

ED 475 641

When Child Welfare Agencies Rely on Voluntary Kinship Placements: New Federalism Issues and Options for States. An Urban Institute Program to Assess Changing Social Policies, Series A, No. A-61.

Karin Malm and Rob Geen

The Urban Institute
Washington, DC

April 2003

BEST COPY AVAILABLE

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

X This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL HAS BEEN GRANTED BY

J. Brown

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

1

2

ES 031238

New Federalism
Issues and Options for States

An Urban Institute Program to Assess Changing Social Policies

THE URBAN INSTITUTE

Series A, No. A-61, April 2003

When Child Welfare Agencies Rely on Voluntary Kinship Placements

Karin Malm and Rob Geen

Child welfare agencies must determine whether to treat kinship care as an extension of the biological family, or as a type of temporary substitute care.

The first issue is safety; [we] have to take the child if there's any risk. One case I've done recently, the mom is using [drugs] and she admits she's using, she goes into detox [substance abuse treatment] and detox knows she has kids so they call it in to us. We go there and ask, 'Who is taking care of your kids?' The mom put the kids with grandmother and has no prior history with the department. We can take the kids into custody for neglect but what's that going to do? She's in treatment already and the kids are safe.

—Connecticut investigative worker

If [the child] can be safe in his own home or with a relative, there would be no need for custody care. If we make a recommendation for the child to go with a relative, the relative usually gets custody in the court hearing.

—Alabama investigative supervisor

At times, child welfare agency staff may help arrange for a child to live with a kinship caregiver but not ask that the court place the child in the custody of the state. During or after a child protective services investigation, a caseworker may suggest that a parent place a child with a relative; the parent and the relative know that if the parent refuses, the agency may petition the court to obtain custody. We refer to these arrangements as voluntary kinship care placements. Many child welfare experts argue that voluntary kinship care placements are common; data from the 1997 National Survey of America's Families (NSAF) estimate that 300,000 children are in such care. In addition, the largest group of children living with kin are doing so privately; that is, there is no child welfare agency involvement. Many private kin caregivers may at some point seek assistance from child welfare agencies, and agency responses to such inquiries vary greatly.

Although not taken into state custody, children in voluntary and private kinship care are vulnerable. Thirty-one percent of children in voluntary kinship care and 43 percent of children in private kinship care live in families with incomes less than the federal poverty level. The socioeconomic risks faced by children in voluntary and private kinship care are significantly higher than children overall and are comparable to the risks faced by children in kinship foster care (Ehrle, Geen, and Clark 2001).

This brief looks at when and how child welfare agencies rely on kin to care for children who are not taken into state custody. Our study results confirm earlier research that child welfare agencies encourage and help arrange for kin to care for children without taking the children into custody. Although child welfare staff may suggest placing a child voluntarily with kin and may even assess the kinship caregiver, it is important to note that the arrangement occurs at the discretion of the birth parent and the kin. Findings in this brief are based on intensive case studies of local kinship care policies and frontline practices conducted by the Urban Institute during the spring and summer of 2001 in 13 counties in four states—Alabama, California, Connecticut, and Indiana.[1]

Several states, including Alabama, prefer voluntary placements whenever possible. Seven states,[2] including Alabama, rely on voluntary arrangements for a majority of the children they place with kin. Other states use voluntary placements under more limited circumstances. When and how often child welfare workers rely on voluntary kinship care varies greatly across states and, to a

PS 031 283

This brief encapsulates findings from *Kinship Care: Making the Most of a Valuable Resource*, an upcoming UI Press book edited by Rob Geen. *Kinship Care* is scheduled for release in late 2003. For more information about this title, please visit http://www.uipress.org.

BEST COPY AVAILABLE

When and how often child welfare workers rely on voluntary kinship care varies greatly across states.

lesser degree, among counties within a state, among offices within a county, and among individual workers.

Under What Circumstances Do Voluntary Placements Occur?

There are many circumstances under which child welfare agencies may arrange for a child to live with kin without seeking custody. In many cases, the risk to the child is not enough to meet the agency standards of an official case opening, court involvement, and formal removal of the child from the home. But caseworkers may still have concerns about the safety of the child if he remains with his birth parent. In other situations, such as when a parent enters inpatient substance abuse treatment or begins a jail sentence, there is no parent with whom the child can remain. In these cases, child welfare is often notified by the treatment facility or by law enforcement. Practices vary across states on the use of voluntary placement arrangements in these situations.

Except in Alabama, respondents in our study states noted that the level of risk necessary for legal intervention is central to the decision to arrange or use voluntary placement arrangements. Voluntary placements occur when there is not enough evidence for legal removal of the child or where the abuse is difficult to prove but the agency still has concerns about the situation. Alabama differs from the other three study states in that if a relative is available and can care for a child, the child would not be taken into custody. Most children removed from their homes and placed with kin are in voluntary placements in each of the Alabama sites we visited. Respondents in Alabama still noted risk to the child as a determining factor. However, when Alabama workers discussed risk, they were focusing on the risk to the child in the relative's home (i.e., relative unable to protect from offending parent), not whether the abuse or neglect allegation necessitated legal intervention. Central to caseworker practice in Alabama is an agency philosophy that keeping families out of the system is better for them—a less is more approach.[3]

In the other three study states, while some respondents in local offices maintained a philosophy that keeping children out of the system is better for families, it was not an agency-wide philosophy. Empowering families to make their own decisions was noted by some workers in these states as a factor in whether voluntary placements are arranged. Workers said that even if a report of abuse and neglect was substantiated, they may accept a voluntary agreement between birth parent and kin if the ongoing risk is low. If parents, early on in the process—that is, before or during an investigation—are cooperative and suggest that a relative can take the child while they seek help, many workers would agree to such an arrangement.

Some respondents noted that their agency is doing more voluntary agreements because it has become more difficult to prove abuse occurred. There is also some indication that agencies would like to do more voluntary placements and often explore the possibility. Many agency workers noted that most families are not able to reach agreements among themselves. Agencies that use family group conferencing, a technique that involves the entire family in planning for the care of a child requiring protection, reported that family meetings may increase the use of voluntary placements. A court official in California noted that family group conferences mean that many families never come into court because they work out an arrangement among themselves. Other agencies noted that negative media attention has made their agencies more risk-averse and that they cannot rely on voluntary placements as much as they had been.

A lack of agency resources was both an incentive for making informal placements and a reason for not making such placements. In agencies where foster care caseloads were high and resources low, workers suggested that voluntary placements may save foster care resources for those children most in need. At the same time, agencies vary in the extent to which they have resources for children not in state custody. In some agencies, workers noted that the only way to get kin the support they needed to care for a child was to take the child into custody.

It is clear from discussions with workers in Alabama that their use of voluntary placements extends to all children regardless of age or type of abuse or neglect. In the other states, older children are more likely to be placed with a relative in a voluntary placement arrangement. Many workers noted case examples involving

teenager–parent conflicts that led to voluntary kinship placements. Besides a child's age, other case characteristics, such as why a child needs protection, affect the decision to suggest a voluntary placement. For example, voluntary placements are more common when a child needs to be placed due to a parental incapacity or other non-abuse-related reason. The relationship between the birth parent and kin caregiver is also a factor in deciding whether to open a case or take custody of a child. Workers noted having to open cases when kin do not get along with, or are scared of, birth parents.

Workers are often involved not in arranging a voluntary placement, but in assessing a placement that was arranged by a birth parent or the police. It is not uncommon for the police to arrange for a relative to temporarily care for a child and then report the family to child welfare. In these situations, child welfare agencies are asked to assess the relative's home. Similarly, workers may begin a child abuse investigation and find that the child in question has already moved into the home of a relative. Many workers feel their hands are tied in such situations—they cannot remove the child from the relative because they cannot prove the child is in danger.

Similar to the decision on whether to use kin voluntarily, workers are following unwritten rules to determine how to support and supervise them.

What Happens after Placement?

The level and nature of ongoing attention paid to voluntary kinship care placements varies significantly based on the risk of the placement and the availability of supportive resources. In Alabama, workers use voluntary placements for higher-risk situations than in other states but almost all are opened as active child protection cases receiving ongoing supervision and services. Workers assess all kinship homes to ensure that caregivers can provide a safe environment, though the standards are considerably lower than for foster care licensure.

In California, Connecticut, and Indiana, workers reported that the agency is unlikely to open a case when a child is in voluntary kinship care.[4] But some local agencies have greater resources for voluntary placements, which may lead workers to open a case and provide services. When opening a case is an option, workers assess the ongoing risk of voluntary placement to determine whether to keep a case open and for how long, and whether and how to supervise the kinship caregiver's home. Similar to the decision on whether to use kin voluntarily, workers are following unwritten rules to determine how to support and supervise them. So, practices vary considerably even within an office.

One of the primary goals of our nation's child welfare system is to ensure that children who have been removed from their parents' homes are reunified or placed in another permanent situation (i.e., adoption or legal guardianship) in a timely manner. Child welfare caseworkers and administrators in all sites visited acknowledged that the agency does not conduct traditional permanency planning when children are in voluntary placements. Even when the agency opens a case following a voluntary placement (as often happens in Alabama), caseworkers do not generally discuss termination of parental rights or adoption. Workers in Alabama noted they help kin obtain temporary legal custody, but consider this a permanent outcome as far as the agency is concerned.

What Support Is Provided to Private Kin Caregivers Who Seek Assistance?

Child welfare agencies vary considerably in how they support private kin caregivers who seek help from them. As mentioned earlier, private kin caregivers care for related children with no interaction with a child welfare agency unless and until they seek help. Depending on the specific circumstances of the case and the local policies and services available, caseworkers may refer private kin caregivers to community services, open a voluntary services case, help kin petition for custody, or help them through the adoption or guardianship proceedings.

In almost half the sites we visited, including all rural sites, workers or administrators noted that they will sometimes take custody of a child and license the kinship caregiver as a foster parent. But this practice is not without controversy. Workers noted that some private kinship caregivers seek child welfare assistance for the foster care stipends.[5] Some workers try to discourage private kinship care providers from seeking assistance by telling them that if the child is made a ward of the state, there is no guarantee that the child will be placed with the kin. Other workers argue that regardless of the motivation, the

state has no legal authority to take custody of the child, citing that there is no evidence of child abandonment if a relative has been caring for a child.

Summary and Discussion

When and how often child welfare workers rely on voluntary kinship care varies greatly across states. The use of voluntary kinship care varies among counties, among offices within a county, and among individual workers. In addition, agencies provide various types and levels of support to private kin caregivers who seek assistance from the child welfare agency. This variation in agency practices toward voluntary and private kinship care reflects differing local visions for the role and scope of the child welfare system.

In most states, child welfare agencies use voluntary kinship care on a fairly limited basis, when caseworkers believe that children face low risk of abuse or neglect based on specific case circumstances. In our study, California, Connecticut, and Indiana are representative of this view of voluntary kinship care. None of the states has clear policies, procedures, or guidance on when and how workers should rely on voluntary kinship care. Workers noted that they follow unwritten rules and commonsense social work to determine when voluntary kinship care is appropriate. Although caseworkers need flexibility to determine the best way to resolve a specific family situation, the lack of policy or practice guidance can lead to great variability in how different caseworkers resolve similar circumstances. Although caseworkers use their professional judgment to determine when children can safely remain with kin, workers' personal opinions of the degree to which families should be involved with the child welfare system influence their decisions.

States such as California, Connecticut, and Indiana may use voluntary kinship care, intentionally or not, to influence birth parents and kin. If, after a substantiated incident of abuse or neglect, a caseworker suggests that the birth parents place a child with kin, birth parents may feel that if they do not comply with this suggestion, their child will be placed in foster care. However, most of the workers we surveyed in these three states spoke cautiously about their use of voluntary kinship care, noting that they do not pressure birth parents to place their children with kin. They also noted that they do not place children in voluntary kinship care, but help birth parents decide the best solution to the crisis.

In contrast, Alabama is representative of a handful of states that use voluntary kinship care whenever possible. Believing that keeping children out of the foster care system is often best, workers and administrators in Alabama openly discussed their use of voluntary kinship care as diversion from foster care. They see their approach to kinship care as a form of family preservation and question why a state agency should assume custody of a child who can be cared for safely by his extended family. Critics of Alabama's approach suggest that they are abdicating at least part of their responsibility for caring for these children. Although children in voluntary kinship care in Alabama receive ongoing supervision, they are not supported by foster care payments and may not have access to the same services as foster children. Also, child welfare staff do not conduct permanency planning for children in voluntary kinship care.

Much of the ongoing debate about kinship care reflects a larger debate about the mission and scope of the child welfare system.

Much of the ongoing debate about child welfare agencies' use and support of kinship care reflects a larger debate about the mission and scope of the child welfare system. Child welfare agencies respond to children who have been abused or neglected and protect them from future harm. Yet it is unclear when and how child welfare authorities should intervene when an abused or neglected child has moved in with kin. When does a family's private crisis become a public concern, and when does the public concern end? What responsibility do child welfare agencies have to assess a kin's ability to protect a child? What responsibility do agencies have to monitor the well-being of children cared for by kin? What responsibility do agencies have to help birth parents whose children are cared for by kin address challenges they face so that they can parent again? Under what circumstances and for how long should child welfare agencies be responsible for providing financial support and services to children cared for by kin?

To answer these questions, child welfare agencies must determine whether to treat kinship care as an extension of the biological family, or as a type of temporary substitute care. If kinship care is merely an extension of the biological family, then child welfare

agencies have limited responsibility for children in kinship care. Child welfare agencies have no reason to intrude into private family matters unless children are at significant risk of abuse or neglect. What may be difficult to gauge is the risk a child in kinship care faces. Without ongoing monitoring, child welfare agencies cannot determine whether kin can prevent birth parents from maltreating their children, not to mention whether kin are abusive or neglectful themselves. Abuse and neglect are possible in all families. If child welfare is to treat kinship care as an extension of the biological family, then agencies have no reason to monitor kinship care placements without evidence of abuse or neglect.

If child welfare agencies view kinship care as a substitute placement, that is, child welfare staff have determined the child is at risk of abuse or neglect and needs to be removed, at least temporarily, from the parents' care and custody, then it seems that the agency should be responsible for monitoring the child's well-being and planning for the child's permanency. Moreover, to the extent that financial assistance influences the well-being of children in out-of-home placement, child welfare agencies should provide the same financial assistance to children whether they are placed with kin or in non-kin foster care.

Most states treat kinship care both as an extension of the biological family and as a temporary substitute placement, depending on how and if child welfare becomes involved and the ongoing risk children face. The challenge that states face is determining when, after becoming involved in a family crisis, child welfare agencies need to stay involved or whether kin can provide adequate safety for a child without agency involvement. States must also determine when and how to become involved when kin that have been caring for a child without child welfare involvement seek assistance. Additional research is needed that assesses the risk of different kinship care arrangements and helps guide child welfare agencies and staff in making these decisions.

Additional research is needed that assesses the risk of different kinship care arrangements and helps guide child welfare agencies and staff in making these decisions.

Notes

1. Alabama: Jefferson (Birmingham), Mobile, and Taladega Counties; California: Los Angeles, San Diego, Santa Clara (San Jose), and Santa Cruz Counties; Connecticut: Bridgeport, Hartford, and Torrington Counties; and Indiana: Lake (Gary), La Porte, and Marion (Indianapolis) Counties.
2. Florida, Kentucky, Ohio, South Carolina, Utah, and Virginia (Jantz et al. 2002).
3. It is important to note that since the signing of a consent decree in the early 1990s Alabama has implemented comprehensive child welfare reforms emphasizing family-centered services and a reduction in out-of-home placements.
4. As mentioned earlier, in these states voluntary placements are most likely to occur when the risk to the child is not sufficient to warrant opening a case.
5. If the child were a foster child, a kinship caregiver would receive a greater monthly stipend than he would through the non-needy relative Temporary Assistance for Needy Families payment. Thus, policymakers worry that the system provides these private kin caregivers with an unintended incentive to seek assistance from the child welfare system as opposed to the welfare office.

References

Ehrle, Jennifer, Rob Geen, and Rebecca L. Clark. 2001. "Children Cared for by Relatives: Who Are They and How Are They Faring?" Washington, D.C.: The Urban Institute. *Assessing the New Federalism* Policy Brief B-28.

Jantz, Amy, Rob Geen, Roseana Bess, Cynthia Andrews, and Victoria Russell. 2002. *The Continuing Evolution of State Kinship Care Policies.* Washington, D.C.: The Urban Institute. *Assessing the New Federalism* Discussion Paper 02-11.

About the Authors

Karin Malm is a research associate in the Urban Institute's Population Studies Center. Ms. Malm specializes in child welfare issues including research on kinship care and adoption. She is currently managing a study examining how child welfare agencies identify, locate, and involve fathers of foster care children.

Rob Geen is a senior research associate in the Urban Institute's Population Studies Center, specializing in child welfare and related child, youth, and family issues.

THE URBAN INSTITUTE
2100 M Street, NW
Washington, DC 20037

Nonprofit Org.
U.S. Postage
PAID
Permit No. 8098
Mt. Airy, MD

Address Service Requested

For more information,
call Public Affairs:
202-261-5709
or visit our web site,
http://www.urban.org.
To order additional copies
of this publication, call
202-261-5687
or visit our online bookstore,
http://www.uipress.org.

This series is a product of *Assessing the New Federalism*, a multiyear project to monitor and assess the devolution of social programs from the federal to the state and local levels. Alan Weil is the project director. The project analyzes changes in income support, social services, and health programs. In collaboration with Child Trends, the project studies child and family well-being.

This policy brief was funded by The David and Lucile Packard Foundation. The *Assessing the New Federalism* project is currently supported by The Annie E. Casey Foundation, The Robert Wood Johnson Foundation, the W. K. Kellogg Foundation, The John D. and Catherine T. MacArthur Foundation, and The Ford Foundation.

This series is dedicated to the memory of Steven D. Gold, who was codirector of *Assessing the New Federalism* until his death in August 1996.

THE URBAN INSTITUTE
2100 M Street, NW
Washington, DC 20037
Copyright © 2003
Phone: 202-833-7200
Fax: 202-293-1918
E-mail: pubs@ui.urban.org

The views expressed are those of the authors and do not necessarily reflect those of the Urban Institute, its board, its sponsors, or other authors in the series.

Permission is granted for reproduction of this document, with attribution to the Urban Institute.

U.S. Department of Education
Office of Educational Research and Improvement (OERI)
National Library of Education (NLE)
Educational Resources Information Center (ERIC)

NOTICE

Reproduction Basis

X	This document is covered by a signed "Reproduction Release (Blanket)" form (on file within the ERIC system), encompassing all or classes of documents from its source organization and, therefore, does not require a "Specific Document" Release form.
	This document is Federally-funded, or carries its own permission to reproduce, or is otherwise in the public domain and, therefore, may be reproduced by ERIC without a signed Reproduction Release form (either "Specific Document" or "Blanket").

PS031238